Under the I	required to	respond to a collection of information unless it displays a valid OMB control numb						
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Complete if Known				
FEE TRANSMITTAL				Filing Date January 5,				
					Named Inventor Gueorgui CHKODROV			
For FY 2009				Examiner Name R. M. Timbi				
Applicant claims small entity status. See 37 CFR 1.27				Art Unit 2167				
TOTAL AMOUNT OF PAYMENT (\$) 1,110.00				Attorney Docket No. 5486-0250PUS1				
METHOD O	F PAYMENT (check	all that apply)		-				
Check	Credit Card	Money Order	Nor	e Other	(please identii	(y):		
x Deposit A	ccount Deposit Account i	Number: 02	2448	Deposit	Account Name	:_ Birch, Stewa	rt, Kolasch &	Birch, LLP
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
x c	Charge fee(s) indicated	below		Charg	ge fee(s) ind	dicated below, e	except for t	he filing fee
x Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17								
FEE CALCU								
1. BASIC FILI	NG, SEARCH, AND E			DOLL FEET	=			
		LING FEES Small Entity	SEA	RCH FEES Small Entity		IATION FEES Small Entity	3	
Application 1		Fee (\$)	Fee (\$	Fee (\$)	Fee (\$)	Fee (\$)	Fees	Paid (\$)
Utility	330	165	540	270	220	110		
Design	220	110	100	50	140	70		
Plant	220	110	330	165	170	85		
Reissue	330	165	540	270	650	325		
Provisional 220		110	0	0	0	0		
2. EXCESS CL								Small Entity
Fee Description Each claim over 20 (including Reissues)							Fee (\$)	Fee (\$)
Each independent claim over 3 (including Reissues)							52 220	26
Multiple dependent claims							390	110 195
Total Claims				e Paid (\$)		ultiple Depend		
16 -40 or HP 0 x 52.00 =				0.00 Fee (\$)			Fee Pald (
HP = highest number of total claims paid for, if greater than 20.								4
Indep. Claims			Fe	Fee Paid (\$)				_
4 -7 or HP = 0 × 220.00 =				0.00				
	nber of independent claims	paid for, if greater than	n 3.					
3. APPLICATIO								
listings und	ation and drawings ex der 37 CFR 1.52(e)), t	ceed 100 sneets o	u paper (e fee due	is \$270 (\$135)	onically fil for emall er	ed sequence or	computer	n
sheets or fr	raction thereof. See 3:	5 U.S.C. 41(a)(1)	(G) and 3	7 CFR 1.16(s).	or single ci	inty) for cacif i	idditional 5	
Total Shee	ts Extra Sheets	Number o	of each ac	ditional 50 or fra	tion thereo	Fee (\$)	Fee	Paid (\$)
	- 100 =	/50 =		(round up to a who	le number)	×		
4. OTHER FEE							Fees	Paid (\$)
	n Specification, \$130	fee (no small ent	ity disco	unt)				
Other (e.g.,	late filing surcharge):							
1404 Notice of Appeal								40.00
1253 Extension for response within third month								10.00
SUBMITTED BY	19. 1	////						
Signature	0/7/1/	3/ #39	1491	Registration No. Attorney/Agent)	29,680	Telephone	(703) 20	5-8000
me (Print/Type)	Michael K. Mutter		,			Date	October 2	9, 2008
	L15.					1		